

# ELECTRONIC RESOURCES REVIEW

**BMJ Best Practice.** BMJ Publishing Group, 1685 South Colorado Boulevard, S-271, Denver CO 80222-4040; ussupport@bmj.com; <http://www.us.bestpractice.bmj.com>; 866.577.0265 x707; institutional subscriptions only (US), contact for pricing.

Point-of-care (POC) databases are rapidly becoming vitally important tools in the integration of evidence-based medicine with direct patient care. The best of these POC resources are not only easy to use, well researched, and well referenced, but must also be frequently updated to allow the clinician to comfortably rely on the presented information for clinical decision making. BMJ Best Practice is a POC database created in 2009 by BMJ Evidence Centre, a division of the BMJ Group. The database is designed to provide clinicians with quickly accessible patient consult information. The user interface is straightforward and simple, enabling the user to reach the desired content with just a few clicks.

## Database contents

BMJ Best Practice contains three primary formats for monograph presentation. The primary access to the monographs for most clinicians will be via the menu of conditions, but users can also use an alphabetical index bar or a keyword search to find topics of interest. Condition monographs are the most comprehensive, containing information on specific conditions with a key point summary, background information, prevention, diagnosis, treatment, follow-up, and additional resources. Treatment information contains evidence from the sister BMJ database, Clinical Evidence. The Condition monographs make use of a "step-by-step" algorithmic approach to aid the clinician in diagnosis and treatment selection. Assessment monographs provide a similar process to guide the clinician through evaluation of a symptom, such as nausea or pruritus, or a lab result finding, such as hyperkalemia. The Assessment monographs provide helpful differential diagnosis suggestions,

including whether those diagnoses are common or uncommon, and alerts for urgent considerations related to the symptom or finding assessment process. The Overview monograph provides introductory information on a condition group or health care service. For example, the end-of-life care overview provides a nice synopsis of hospice and palliative care, patient care goals, disease trajectories, and management of common end-of-life symptoms. Although the content presentation is primarily text driven, images, charts, and diagrams are incorporated into many monographs. These may be accessed directly in the text of the monograph or in the Resources section of each monograph. Additionally, the Resources section provides access to related clinical content from other BMJ Group products and publications. Full-text availability of related content depends on personal or institutional subscription to those products.

Bookmarking and notes features can be added to customize access to the content for the end user. A portfolio option allows the end user to collect and track material for continuing medical education (CME).

All content is fully referenced with hyperlinked citation number notes within the text as well as a cumulative references and resources page for every monograph. Recommendations included in the monographs are identified with an evidence grade using the Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) Working Group evidence tables system with embedded links to a brief summary and an explanation of the assigned GRADE level of evidence. BMJ Best Practice provides basic drug information content from American Hospital Formulary Service (AHFS) Drug Essentials, published by the American Society of Health-System Pharmacists, for US end users, and from Martindale Complete Drug Reference, published by Wolters Kluwer Health, for Canadian and international subscriptions.

## Access

The database is online only; no print version exists. Access is available online and for iOS (iPad/iPhone) and Android mobile device platforms. All topics can be printed, emailed, or saved with a permalink.

Interestingly, individual subscriptions to BMJ Best Practice are not available in the United States. However, BMJ Best Practice content is contained in the ePocrates online product, ePocrates Online Premium, or the ePocrates mobile product, ePocrates Essentials, which are available by subscription from ePocrates.com (\$159.99/year, mobile or online access). For students, small clinics, or small practices, access via ePocrates.com could be a viable solution to provide POC support for those with limited resources. Institutional subscriptions are an option for those organizations wishing to provide direct, Internet protocol (IP) authentication to access the database. All institutional subscriptions include access onsite, remotely, and from mobile devices.

Unfortunately, basic information available on website appears to be out of date. When the reviewer confirmed the number of topics available in BMJ Best Practice, the statement "information relating to over 10,000 diagnoses by end of 2009; 5000 at launch" appeared in the production information. Support services from both the UK-based and US-based offices were easily accessible and helpful by email and telephone.

## Timeliness

A critical issue with POC databases is the provision of accurate, evidence-based medicine in line with current guidelines and clinical practice. The process of review for all evidence-based medicine databases is complex and time consuming. According to product information on the BMJ Best Practice website, the editorial and peer-review process for content contained in the database is robust and fully disclosed. Expert authors are commissioned, provided with a research data set and a clinical

editor to work with during the authorship and review process. All drafts are reviewed by at least two peer experts and an in-house clinician, followed by clinical staff comments and independent medical copyediting. Information on contributing authors and peer reviewers, including professional conflict of interest disclosure statements, is provided with each monograph. While all articles in the BMJ Best Practice database have a prominently displayed review date, the actual scheduled frequency of updates is

not disclosed on the product's website. The opening screen of the database provides a link to a list of the fifty latest updated topics.

### **Assessment**

BMJ Best Practice provides an easy-to-use, evidence-based POC tool for clinicians and students. The flexibility of online as well as mobile device access adds to the value of the resource. The availability of BMJ Best Practice content via ePocrates for individual users expands the

access to content for those clinicians who are not affiliated with an organization or institution subscription source.

*Bridget McCrate Protus, RPh,  
PharmD, CGP, MLIS,  
bprotus@hospiscript.com, HospiScript  
Drug Information Center,  
HospiScript, a Catamaran Company,  
Dublin, OH*

DOI: <http://dx.doi.org/10.3163/1536-5050.102.3.020>